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| PATENT APPLICATION FEE DETERMINATION RECORD<br>Substitute for Form PTO-875                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                               |                                           |            | Application or Docket Number<br>09/581,651  | Filing Date<br>10/10/2000 | <input type="checkbox"/> To be Mailed |                        |                            |           |                        |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|------------|---------------------------------------------|---------------------------|---------------------------------------|------------------------|----------------------------|-----------|------------------------|
| APPLICATION AS FILED – PART I                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                               |                                           |            |                                             |                           | OTHER THAN<br>SMALL ENTITY            |                        |                            |           |                        |
| (Column 1)                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                               | (Column 2)                                |            | SMALL ENTITY <input type="checkbox"/>       | OR                        | OTHER THAN<br>SMALL ENTITY            |                        |                            |           |                        |
| FOR                                                                                                                                                                                                                                                                                                                                                                                                                                  | NUMBER FILED                                                                                                                                                                                                                  | NUMBER EXTRA                              | RATE (\$)  | Fee (\$)                                    | RATE (\$)                 | Fee (\$)                              |                        |                            |           |                        |
| <input type="checkbox"/> BASIC FEE<br>(37 CFR 1.16(a), (b), or (c))                                                                                                                                                                                                                                                                                                                                                                  | N/A                                                                                                                                                                                                                           | N/A                                       | N/A        |                                             | N/A                       |                                       |                        |                            |           |                        |
| <input type="checkbox"/> SEARCH FEE<br>(37 CFR 1.16(k), (i), or (m))                                                                                                                                                                                                                                                                                                                                                                 | N/A                                                                                                                                                                                                                           | N/A                                       | N/A        |                                             | N/A                       |                                       |                        |                            |           |                        |
| <input type="checkbox"/> EXAMINATION FEE<br>(37 CFR 1.16(o), (p), or (q))                                                                                                                                                                                                                                                                                                                                                            | N/A                                                                                                                                                                                                                           | N/A                                       | N/A        |                                             | N/A                       |                                       |                        |                            |           |                        |
| TOTAL CLAIMS<br>(37 CFR 1.16(i))                                                                                                                                                                                                                                                                                                                                                                                                     | minus 20 =                                                                                                                                                                                                                    | *                                         | X \$ =     |                                             | X \$ =                    |                                       |                        |                            |           |                        |
| INDEPENDENT CLAIMS<br>(37 CFR 1.16(h))                                                                                                                                                                                                                                                                                                                                                                                               | minus 3 =                                                                                                                                                                                                                     | *                                         | X \$ =     |                                             | X \$ =                    |                                       |                        |                            |           |                        |
| <input type="checkbox"/> APPLICATION SIZE FEE<br>(37 CFR 1.16(s))                                                                                                                                                                                                                                                                                                                                                                    | If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |                                           |            |                                             |                           |                                       |                        |                            |           |                        |
| <input type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                               |                                           |            |                                             |                           |                                       |                        |                            |           |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2.                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                               |                                           |            |                                             |                           | TOTAL                                 | TOTAL                  |                            |           |                        |
| APPLICATION AS AMENDED – PART II                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                               |                                           |            |                                             |                           | OTHER THAN<br>SMALL ENTITY            |                        |                            |           |                        |
| AMENDMENT                                                                                                                                                                                                                                                                                                                                                                                                                            | (Column 1)                                                                                                                                                                                                                    |                                           | (Column 2) |                                             | (Column 3)                | SMALL ENTITY                          | OR                     | OTHER THAN<br>SMALL ENTITY |           |                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                      | 06/06/2007                                                                                                                                                                                                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |            | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA          | RATE (\$)                             | ADDITIONAL<br>FEE (\$) |                            | RATE (\$) | ADDITIONAL<br>FEE (\$) |
| Total (37 CFR 1.16(i))                                                                                                                                                                                                                                                                                                                                                                                                               | * 3                                                                                                                                                                                                                           | Minus                                     | ** 35      | = 0                                         | X \$ =                    |                                       | OR                     | X \$ 50=                   | 0         |                        |
| Independent (37 CFR 1.16(h))                                                                                                                                                                                                                                                                                                                                                                                                         | * 3                                                                                                                                                                                                                           | Minus                                     | ***5       | = 0                                         | X \$ =                    |                                       | OR                     | X \$ 200=                  | 0         |                        |
| <input type="checkbox"/> Application Size Fee (37 CFR 1.16(s))                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                               |                                           |            |                                             |                           |                                       |                        |                            |           |                        |
| <input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                               |                                           |            |                                             |                           |                                       | OR                     |                            |           |                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                               |                                           |            |                                             |                           | TOTAL<br>ADD'L<br>FEE                 | OR                     | TOTAL<br>ADD'L<br>FEE      | 0         |                        |
| AMENDMENT                                                                                                                                                                                                                                                                                                                                                                                                                            | (Column 1)                                                                                                                                                                                                                    |                                           | (Column 2) |                                             | (Column 3)                | RATE (\$)                             | ADDITIONAL<br>FEE (\$) |                            | RATE (\$) | ADDITIONAL<br>FEE (\$) |
|                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                               | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |            | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA          | X \$ =                                |                        | OR                         | X \$ =    |                        |
| Total (37 CFR 1.16(i))                                                                                                                                                                                                                                                                                                                                                                                                               | *                                                                                                                                                                                                                             | Minus                                     | **         | =                                           | X \$ =                    |                                       | OR                     | X \$ =                     |           |                        |
| Independent (37 CFR 1.16(h))                                                                                                                                                                                                                                                                                                                                                                                                         | *                                                                                                                                                                                                                             | Minus                                     | ***        | =                                           | X \$ =                    |                                       | OR                     | X \$ =                     |           |                        |
| <input type="checkbox"/> Application Size Fee (37 CFR 1.16(s))                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                               |                                           |            |                                             |                           |                                       | OR                     |                            |           |                        |
| <input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                               |                                           |            |                                             |                           |                                       | OR                     |                            |           |                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                               |                                           |            |                                             |                           | TOTAL<br>ADD'L<br>FEE                 | OR                     | TOTAL<br>ADD'L<br>FEE      | 0         |                        |
| <p>* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.</p> <p>** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".</p> <p>*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".</p> <p>The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.</p> |                                                                                                                                                                                                                               |                                           |            |                                             |                           |                                       |                        |                            |           |                        |
| <p>Legal Instrument Examiner:<br/>Rozenia Harmon</p>                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                               |                                           |            |                                             |                           |                                       |                        |                            |           |                        |

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 25, enter "25".

The "Highest Number Previously Paid For" in THIS SPACE is less than \$1, enter "1".

## Legal Instrument Examiner:

## Legal Instruments

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.